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This service distributes news and information to Sailors and Marines, their families, civilian employees, and retired Navy and Marine Corps families. Further dissemination of this e-mail is encouraged.

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MN970240. Health Centers and Gyms Team to Speed Injury Recovery

Bremerton, WA - Thanks to a partnership between Naval Hospital (NH) Bremerton and Moral, Welfare and Recreation (MWR) departments at nearby naval facilities, injured Sailors who need physical therapy are spending more time on the job and less time waiting and traveling.

The physical therapy department at Bremerton and the MWR departments at Naval Submarine Base Bangor, Puget Sound Naval Shipyard and Naval Station Everett have set up Health and Physical Readiness Centers at each facility's gym.

"The primary purpose of the centers is to enable patients to be treated much closer to their place of work," said LCDR Barbara Butler, MSC, head of the hospital's physical therapy department. "Our goal is to get the Sailor healthy enough to get back to training, back to their jobs."

According to Butler, patients recovering from an injury usually need between eight and 15 visits to a physical therapy clinic. This adds up to a lot of lost man-hours, especially for those who needed to travel some distance.

"Now, some can just walk over to the center," said

Butler.

An added bonus of the new partnership is that the physical therapy department can see more patients. The small clinic at the hospital's clinic limits access.

"Just due to increased space we have reduced the wait (to get into therapy) to one to two weeks," Butler said.
"This increases the effectiveness of the therapy also, allowing patients to rehabilitate quicker."

By HM3 Heidi Newman and Judith Robertson, NH Bremerton
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MN970241. Sigonella's Teen Clinic Wins Health Promotion Honors

Sigonella, Italy - Helping teens adopt a healthy lifestyle has made U.S. Naval Hospital (USNH) Sigonella a Department of Defense Health Promotion Prevention Initiative (HPPI) winner.

Sponsored by the Office of the Assistant Secretary of Defense for Health Affairs, HPPI recognizes winners for their exceptional health promotion program and also supports the program with a grant.

The hospital's winning program, Teens With A Future, (TWAF) was developed by LT Jackie Bateman, NC; LT LaShawn Sanchez, NC; and HM3 Dorenda Smith. TWAF received \$22,000 which, according to Bateman, will offset costs of pamphlets and equipment used at health fairs and in the teen clinic. The money will also be used to purchase the Cooperative Information Project charts (COOP) and software required to assess teens' needs.

"The plan is to enhance our present program by assessing students and then giving classes for their specific needs," said Bateman. "For instance, we may think the students need a class on birth control, but by assessing the students we may learn that what they really need is a class on how not to be bored during the summer."

NH Sigonella has other "teen friendly" programs including a teen clinic where adolescents can be seen without their parents; health fairs at the end of every school semester; health education classes given at the school by health care providers; and counseling.

Other commands who received HPPI grants include Branch Medical Clinic NAS Brunswick, ME for its Bruswicked Fit initiative; Navy Environmental Health Center Norfolk, VA for its Electronic Dialogue for Health Promotion Communities; and Naval Medical Center San Diego for their Health Promotion at the Deck Plates initiative.

By JO1(SW) Patricia Huizinga, USNH Sigonella

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MN970242. Drug Masking Agents: Do They Work?

Drink a quart of vinegar.

Consume large quantities of vitamin B.

Sip a pot of gold seal herb tea.

What's the common thread to these three statements?

They're all ways Sailors and Marines have tried to beat urinalysis drug testing.

As long as the Navy's been doing urinalysis to test for illegal drug use, there have been Sailors and Marines who try to "beat the system." And while they are becoming craftier in their methods to "fool" drug tests, the Navy's drug labs are getting better at detection.

Some of the things Sailors and Marines do to prevent their urine from indicating they've been using drugs are easy to countermand.

"What a Sailor is trying to do when he drinks vinegar is change the pH (acidity) of his or her urine," said CDR Linda Lininger, MSC, the commanding officer of Navy Drug Laboratory Great Lakes, IL. "We adjust for that, so changing the pH isn't going to have any effect (on the results of the test)."

While vitamin B does affect urine - it turns it a deep yellow - it won't change the outcome of a drug test if illegal drugs were taken.

Some of the more sophisticated methods individuals use to cover up the fact they've been using drugs are herbs and chemicals that are marked as "masking agents" for illegal drugs. One such agent is gold seal, an herb that has a long history of home remedy use, but has no effect on masking drug use.

"I don't know of any non-toxic herbs or chemicals that people can take internally that will consistently mask illegal drug use," said Lininger, who's on her third Navy drug lab tour. "Generally, all these herbs and over-the-counter remedies provide is a diuretic effect. They don't mask drug use at all."

Diuretics are agents that promote the excretion of urine. Overuse of these agents can be dangerous. Side effects can include plummeting blood pressure, seizures and even death.

According to Lininger, use of these folklore-type methods of trying to beat urinalysis tests can often draw attention rather than lessen suspicion by changing the normal color, odor or consistency of the urine.

"We examine the urine carefully even before we start other testing," said Lininger. "We look at the color. Is it darker than normal? Is it lighter? We check the odor. Does it smell 'wrong'? If the answer to these questions is yes, a further check of the specimen's physical properties is performed."

Any specimens that test positive by the screening tests are analyzed again by a mass spectrometer, an instrument that can break down a substance such as urine to its basic components to determine exactly what's in it. It confirms these specimens that have tested positive do contain cocaine, amphetamines or other illegal drugs.

"There's no fooling the mass spectrometer," said Lininger.

What happens to Sailors who test positive is up to his

or her Commanding Officer.

"We just report our findings," said Lininger. "After that, it's up to the command."

Lininger did recommend one proven way to ensure a negative result when it comes to urinalysis testing.

"Don't use drugs. It works every time." By Jan Davis, Bureau of Medicine and Surgery

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MN970243. USS BOXER Medical Crew Sharpens Skills
Aqaba, Jordan - Stethoscopes and scalpels took
the place of M-16s and helicopters for some USS BOXER (LHD
4) Sailors and Marines recently in Infinite Moonlight 97, an
exercise with the Royal Jordanian Armed Forces.

Fleet Surgical Team 9 presented a week-long program of morning lectures and afternoon practical sessions covering current principles of resuscitation and stabilization of trauma victims and patients with abnormal cardiac rhythms. The training ended with a mass casualty triage and treatment exercise.

Twenty Jordanian physicians and nurses attended the course at Princess Haya El Hussein Hospital in Agaba.

"The Jordanians have approaches in patient management similar to our own, with minor differences," said LT John Hammes, course director. "This class was an excellent opportunity to share the standards of care practiced in the U.S. and learn how they evaluate and treat patients here in Jordan. Jordanian physicians have very strong clinical skills, but many have not had the formal training to integrate those skills in an emergent situation."

"The feedback from the course has been very positive," said Lt. Col. Suleyman Abbadi, director of emergency medicine at King Hussein Medical Center in Amman. "Every one of the participants who attended will change some aspect of their practice based on what they learned during this week."

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MN970244. Portsmouth Cemetery Spans History

Portsmouth, VA - They came from all over the world. They fought pirates, storms, wars, and ship-borne diseases.

Now they rest in the cemetery at America's first naval hospital, Naval Medical Center Portsmouth, VA. Occupying less than two acres on the hospital complex, this cemetery represents a unique chapter in the history of seafaring.

According to retired Navy CAPT Ted H. Conaway Jr., the hospital's historian and unofficial caretaker, the cemetery was established in observance of a British custom that a host whose guest died should provide a final resting place.

Among those resting in the cemetery are U.S. sailors who died in every conflict between the 1830s and World War II, including three winners of the Navy Medal of Honor. Many of the 881 graves are filled by victims of diseases, such as yellow fever and beriberi.

The first man buried in the cemetery was George Butler, a young seaman who died in a fall from the rigging of the USS CONSTITUTION, known as "Old Ironsides," as it sailed home into Virginia's Norfolk harbor on Aug. 12, 1838.

Also buried in the cemetery are three Russian sailors that died from beriberi, a disease caused by a vitamin deficiency; three Spaniards taken prisoner during the Spanish-American War; and three German sailors who died after their ship sailed into the Chesapeake Bay to escape a British warship shortly before America entered World War I.

Although many of the cemetery's burial records are missing, many of the dead surely perished fighting pirates, which was one of the young U.S. Navy's main responsibilities, according to Conaway.

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MN970245. Beaufort Department Is Navy's Top Purchasing Activity

Beaufort, SC - Naval Hospital Beaufort's purchasing department is the Navy's top purchasing activity of the year for small activities for 1997.

Beaufort won the award based on its exceptional customer service, management, adherence to regulations, and goal achievement.

The Award will be presented in Baltimore at the Department of the Navy's Simplified Acquisition Buyers Conference in July.

Beaufort's Commanding Officer, CAPT Clint Adams, MC, credited purchasing department head LCDR Ben Liam, MSC, with "leading the revolution" to a better purchasing department by employing new technology with old fashioned peoplecentered leadership.

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MN970246. Kerrigan Selected for AMA Award

Charleston, SC - CDR Kevin Kerrigan, MC, Naval Hospital Charleston's department head for surgical services, is the American Medical Association's (AMA) Dr. Nathan Davis Award recipient in the career public service category for 1997.

The award is presented annually to the individual who promotes "the art and science of medicine and the betterment of the public health."

Kerrigan will accept his award at the AMA's annual awards dinner in September. $\,$

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MN970247. TRICARE Question and Answer

Question: I'm a retiree newly enrolled in TRICARE Prime. Do I have a higher priority at military treatment facilities than active duty family members not enrolled in Prime, even though I'm a retiree?

Answer: Yes. All beneficiaries enrolled in TRICARE Prime, including retirees and their family members, have a higher priority over those who are not enrolled, including

non-enrolled active duty family members.

Additional information on TRICARE is available on the Department of Defense (Health Affairs) Homepage on the World-Wide Web at www.ha.osd.mil.

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MN970248. Healthwatch: Summer Sun Can Mean Danger While Having Fun

Hooray summer is here! So is the summer heat.

As you enjoy the fun outdoor activities be aware of the basic facts and prevention strategies to reduce the risk of crucial illnesses in hot summer weather. Heat-related illnesses include heat exhaustion, heat stroke, heat cramps, and sunburn.

Sunburn is caused by over-exposure to sunlight. Symptoms are redness, swelling and sometimes blistering. Pain occurs within six to 48 hours of exposure.

Heat rash, commonly known as prickly heat, occurs when the sweat ducts become clogged and the sweat becomes trapped.

Heat cramps occur when a person sweats heavily and loses a great amount of salt. Cramping of the arms, legs, and abdomen can happen during or after exercise or physical work, such as when hiking, running, or lifting heavy objects.

Heat exhaustion is caused by not drinking enough water or other fluids. The signs to look for are weakness, faintness, dizziness, sweaty skin, headaches, nausea, and possible loss of appetite. Heat exhaustion, left untreated, can lead to heat stroke.

Heat stroke symptoms include headaches, nausea, high body temperature, and a possible loss of consciousness. Emergency treatment is required for heat stroke.

Simple prevention strategies can be used to counteract the effects of heat.

- Drink plenty of fluids before, during and after any physical activity. When doing prolonged heavy work or exercise, drink at least one cup of fluid every 15-20 minutes.
- Stay in shaded areas when exercising or doing other physical activity.
- Wear loose fitting clothing that allows circulation of air and helps promote heat loss.
 - Keep the skin dry to prevent heat rash.
- Wear sunscreen with a SPF 15 or greater even on cloudy days. Sunscreen may be used on children six months or older.
- Avoid being in the sun between 10:00 a.m. and 3:00 p.m. when the sun is most direct.
- Wear light-colored, longer clothing and a wide brim hat to reflect the sun.
- Be aware of the side effects of any medications. Some medications produce an allergic rash on body parts exposed to the sun.

Children are at higher risk for heat related illnesses since their body temperatures rise faster, and they sweat less than adults.

According to a recent study, a child 10 years or younger should drink until no longer thirsty and then drink an additional half a glass. Older children and adolescents should drink an additional full glass.

Older adults may need to be reminded to drink fluids because often their sense of thirst is reduced even though they may be getting dehydrated. Studies indicate that heat raises older persons' body temperatures and heart rates more than in younger people, and they perspire less readily - all factors that can contribute to heat-related illnesses.

Hot summer weather affects everyone. Use basic prevention strategies to help reduce your risk of heat-related illness and injury.

By BethAnn Cameron, The Mercury, Fort Sam Houston, TX usn- $$\operatorname{\mathsf{USN}}^{-}$$

Feedback and comments are welcome. Story submissions are encouraged. Contact Jan Davis, MEDNEWS editor, at email mednews@bms200.med.navy.mil, telephone 202/762-3223 (DSN 762-3223), or fax 202/762-3224.

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